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						(Depositor's name)	
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APPLICATION NO.	PPLICATION NO. FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/573,982 04/18/2007 Ari Kattainen 1381-0331PUS1 4163 TITLE OF INVENTION: ELEVATOR BRAKE AND BRAKE CONTROL CIRCUIT							
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	FEE TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1510	\$300	\$0	\$1810	05/17/2010	
EXAMIN	ap.	ART UNIT	CLASS-SUBCLASS]	41010	05,17,2010	
				J			
SALATA, ANT 1. Change of correspondence		2837	187-288000				
CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON PLEASE NOTE: Unless an assignee is identified below, no assigner recordation as set forth in 37 CFR 3.11. Completion of this form is No. (A) NAME OF ASSIGNEE			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. THE PATENT (print or type) adata will appear on the patent. If an assignee is identified below, the document has been filed for T a substitute for filing an assignment. (B) RESIDENCE: (CITY and STATE OR COUNTRY)				
Kone Corporation		· · · · · · · · · · · · · · · · · · ·		and STATE OR C	OUNIKY)		
Rone Corporation Helsinkl, Finland Please check the appropriate assignee category or categories (will not be printed on the patent): □ Individual □ Corporation or other private group entity □ Government							
4a. The following fee(s) are submitted: ☑ Issue Fee ☑ Publication Fee (No small entity discount permitted) ☑ Advance Order - # of Copies			b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 02-2448 (enclose an extra copy of this form).				
5. Change in Entity Status a. Applicant claims St	MALL ENTITY statu	s. See 37 CFR 1.27.	b. Applicant is no long	ger claiming SMAL	L ENTITY status. See 37 CF	FR 1.27(g)(2).	
NOTE: The Issue Fee and P interest as shown by the reco	ublication Fee (if requords of the United Stat	ired) will not be accepted es Patent and Trademark	l from anyone other than the Office.	ne applicant; a regis	tered attorney or agent; or th	e assignee or other party in	
Authorized Signature Penny Caudle #46,601 Date May 7, 2010							
Typed or printed nameD. Richard Anderson				Registration No	o40,439		
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